

Common Risk Factors for MRSA Infection

- History of MRSA infection or colonization
- History of recurrent skin infections
- Close contact with someone known to have MRSA
- Admission to a health care or long-term care facility within last 12 months
- Antibiotic use within the last 3 to 6 months
- Placement of a permanent indwelling catheter or medical device that passes through the skin
- Receiving kidney dialysis
- Weakened immune system
- Injectable drug use
- Incarceration within the last 12 months
- Crowded living conditions
- Participation in sports that include skin-to-skin contact or the sharing of equipment and clothing
- Poor personal hygiene



Indiana State Department of Health

2 North Meridian Street
Indianapolis, IN 46204
(317) 233-1325
www.in.gov/isdh/index.htm
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Additional Resources

www.cdc.gov/features/mrsainschools/
www.cdc.gov/features/handhygiene/
www.in.gov/isdh/healthinfo/handwashing.htm
www.statehealth.in.gov

MRSA PREVENTION



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Methicillin-Resistant *Staphylococcus aureus* (MRSA)

Staphylococcus aureus, or Staph, is commonly found on the skin of individuals throughout the community. About 30 percent of the population carries Staph. Staph generally does not cause illness. When it does cause illness, it usually causes small infections on the skin where it enters the body through openings in the skin.

Symptoms of a skin infection with Staph may include red, swollen, warm, painful pimple-like bumps, boils, or blisters. It may also appear like a spider or insect bite. Pus may accumulate and drain at the site of infection. Fever and chills may occur if the infection progresses. Serious infections may occur, such as bloodstream infections and pneumonia.

MRSA is a type of Staph that is resistant to methicillin, an antibiotic that is related to penicillin. MRSA has existed for several decades and is found worldwide. MRSA is typically spread by close contact, direct or indirect, with a person colonized (carrying) or infected with MRSA.

Guidelines for Preventing MRSA Infections

The single most important way to prevent the spread of infection is proper and frequent hand hygiene practices. Proper hand hygiene includes hand washing and the use of hand sanitizers. Hand washing begins by wetting the hands. Next, apply soap and rub hands together vigorously for a least 15 seconds, about the length of time to sing “Happy Birthday” twice. Rinse hands and dry thoroughly. Hands should be washed especially when visibly dirty, after using the restroom, after touching infected areas or bandages, and before handling food. Hand sanitizers should be used only when hands are not visibly dirty. After applying the sanitizer, rub hands together until they are dry. Be sure to cover all areas of the hands. This should take at least 15 seconds or you probably did not apply enough sanitizer. Another way to prevent the spread of infection is to bathe with soap at least once daily and after athletic practices and competitions, then change into clean clothes.

Laundrying clothes, towels, athletic uniforms, and athletic gear appropriately after each use also helps prevent the spread of infections. You should never share personal items, such as clothing, towels, soap, deodorant, razors, and nail clippers.

Additionally, keep wounds covered and change bandages when they become soiled. Do not let others touch your infection or the soiled bandages. When prescribed antibiotics, take them exactly as directed and complete the entire course, even if you feel better. Never share your prescription with others. Contact your health care provider if your skin becomes red, swollen, painful, or begins to drain. If you experience fever, chills, red streaks around the infection site, or drainage increases, seek immediate medical attention. Below is a link to a poster about caring for skin infections. This poster could also be used in community settings.

http://www.in.gov/isdh/pdfs/MRSA_SkinInfectionPoster.pdf